

choices



quick start summary 2014 annual benefits enrollment

Welcome to annual benefits enrollment for your County of Los Angeles *Choices* benefits program. This year, annual benefits enrollment is October 1 through October 31, with your benefit elections taking effect January 1, 2014.

What's Changing for 2014

Premium Rates

County employees will see an increase in their monthly premium rates for medical plans. The monthly premium rates will decrease for Delta Dental, SafeGuard dental, optional group term life, and dependent life. Any change to the *Choices* monthly benefits allowance will be announced once County and union negotiations are finalized. Annual benefits enrollment ends on October 31 and will not be extended, even if a change in the *Choices* benefits allowance is announced after annual enrollment.

You can find the premium rates for the new plan year on the Personalized Enrollment Worksheet you received along with this summary.

Benefits

Durable medical equipment benefits are enhanced for the Kaiser and CAPE/Blue Shield medical plans. The CAPE/Blue Shield plans will also include enhanced vision benefits (see medical plans comparison chart).

Health Care Reform Changes

Adult Children Under Age 26

Beginning January 1, 2014, you can cover eligible adult children under age 26 even if they are eligible for another employer-sponsored health plan.

Health Insurance Marketplace

Starting January 1, 2014, Health Care Reform requires that most American citizens have health insurance. To ensure everyone has access to coverage, the government will launch the Health Insurance Marketplace. As a full-time County employee, you won't need to use the marketplace because you are eligible to enroll in a medical plan under *Choices*. See page 7 of the Enrollment Highlights Guide for more information.

DOMA and Proposition 8

On June 26, 2013, the United States Supreme Court ruled on the Defense of Marriage Act and Proposition 8, clearing the way for same-sex marriage in California. All married couples will now enjoy the same state and federal tax benefits. You may enroll your same-sex spouse during annual enrollment for benefits starting January 1, 2014. You may also use your Spending Accounts to pay for eligible expenses incurred by a same-sex spouse and his or her children.

Important Points to Consider

These benefits require documentation or may require your attention every year. Read through them to ensure you receive the benefits you want for 2014.

Waiving Medical Coverage

- Waivers do not roll over to the next year. You must complete a waiver if you do not want *Choices* medical coverage.
- You may waive coverage only if you have insurance through your spouse, another employer or Medicare, and if your other plan offers similar coverage under *Choices*.
 - In 2014, you may not waive coverage by purchasing an individual policy or by purchasing insurance through the health insurance marketplace. (Subject to County and Union agreement.)
- If you do not submit a new or updated waiver (or if your waiver is not approved):
 - You will be automatically enrolled in a medical plan for 2014 (see 2014 Enrollment Highlights Guide for details).
 - You won't be able to waive your medical coverage until 2015.

Coverage for Eligible Family Members*

Scenario	Required Action
Switching medical plans	Provide Social Security numbers (SSN) for all eligible family members.
Adding an eligible family member	Provide SSN and required documents (birth/adoption/marriage certificate, etc.) within 10 calendar days from enrollment. Your children must be under age 26.
Family member is not eligible for coverage	You must drop coverage for an individual who is no longer eligible (such as when you divorce or end a domestic partnership).

* Your family member's enrollment is incomplete and pending until you provide an SSN or other necessary documentation. If you don't submit this information by the deadline, the pending enrollment will cancel and your family member will not have coverage for 2014.

Health Care and Dependent Care Spending Accounts

- Neither account automatically rolls over to the next year.
- You must enroll during annual benefits enrollment if you want to participate in these accounts in 2014.
- The County will contribute up to \$375 a month to your Dependent Care Spending Account (based on your annual income). See page 6 of the Enrollment Highlights Guide for important rules and eligible dependents.

Medical Coverage Protection/Long-Term Disability (LTD) Health Insurance

Check your Personalized Enrollment Worksheet to see if you are eligible to enroll in 100% LTD health insurance. See page 5 of the Enrollment Highlights Guide for eligibility rules.



easy as 1...2...3 (and 4)

1. Decide if you want to enroll or make changes

- Review your enrollment materials and your Personalized Enrollment Worksheet and use the information and tools available at **mylacountybenefits.com**.
- Annual benefits enrollment is your chance to enroll in or change medical and dental plans as well as optional benefits, such as life, medical coverage protection (long-term disability health insurance), and accidental death and dismemberment insurance.
- You must take action (enroll) every year to:
 - Waive medical coverage.
 - Participate in a Health Care and/or Dependent Care Spending Account.
- If you make no changes, all current benefits will continue at 2014 premium rates **except** Health Care or Dependent Care Spending Accounts and waiving medical coverage.

2. Get ready to enroll

- See if the Social Security number (SSN) requirement applies to you:
 - If you stay in the same medical plan, **SSNs are required** for eligible family members you add to coverage.
 - If you change to a new medical plan, **SSNs are required** for all family members to be covered.
- Gather birth certificates and/or marriage certificate for family members you add to coverage.
- Visit **mylacountybenefits.com** to find helpful tools such as benefits and enrollment tutorials and spending account calculators.

3. Enroll online or by phone October 1 through October 31, 2013

Online – mylacountybenefits.com

- Log in using your employee number and PIN (see your Personalized Enrollment Worksheet).
- Follow the Enrollment Steps.
- Click the “Confirm Enrollment” button.
- Print your confirmation statement before logging off. If you can’t print, write down your confirmation number shown on the “Thank You” page.

By phone – call 888-822-0487

- Follow the recorded instructions.
- Don’t hang up until you hear “Your benefit elections have been confirmed and recorded,” and have written down your confirmation number.
- If you don’t receive a confirmation statement in the mail within seven days from the date you enroll, call the Benefits Hotline at 213-388-9982.

Be sure to provide all required documentation to the County Benefit Plan Administrator within 10 days from the date you enroll to guarantee coverage. If you are adding a dependent, please write your name, employee number, and your dependent’s SSN on each document or certificate. You may submit your documents by:

- Mail: Plan Administrator, P.O. Box 67128, Los Angeles, CA 90067
- Fax: 310-788-8775
- Email: documents@mylacountybenefits.com
- Computer upload: Use the “Required Documents” link on your Personal Homepage in the enrollment website.

4. Other important information

- Review your 2014 benefits confirmation statement to ensure accuracy.
- You may not change your benefits after October 31, 2013, until the next annual benefits enrollment period. **Note:** Mid-year coverage changes are allowed only for a qualified change in family status (e.g., marriage, divorce, birth, or adoption) or work situation that affects your benefits.
- **You MUST remove ex-spouses, ex-domestic partners, and other ineligible family members from your medical and dental coverage.** See the *Choices Summary Plan Description* for more details on dependent eligibility.
- The County reserves the right to take appropriate action against anyone who knowingly presents a false or fraudulent claim under the Plan, or who otherwise attempts to defraud the Plan, including (but not limited to) termination from participation in the Plan and of employment.
- If you have questions, call the Benefits Hotline between 8 a.m. and 4 p.m. (5 p.m. during annual benefits enrollment) at 213-388-9982.